Acetaminophen overdose is the leading cause for calls to Poison Control Centers (more than 100,000/year).

Acetaminophen is not as benign as Tylenol’s slogan, “Nothing’s safer,” alleged Acetaminophen poisoning has become the leading cause of acute liver failure (ALF) in the U.S. Some of the cases are suicide attempts, some are unintentional.

Many consumers don’t realize they’re overdosing on acetaminophen because they don’t know it’s an ingredient in hundreds of over-the-counter drugs — Acetaminophen in combination with aspirin, ibuprofen, ibuprofen, Percodan, Percodan, Theratul, Exceldrin, Corticid, Triaminic, Disat, Midol, Panpren, etc. — and prescription pill makers, including Viocon and Percocet.

For those with liver damage from hepatis- and/or heavy alcohol a smaller amount of acetaminophen than the recommended “therapeutic” dose can lead to acute failure. In 2006 Dr. Lee presented data at a confer- ence showing that one in eight cases of acute liver failure attributed to hepatitis B also in- volves acetaminophen poisoning. Lee sum- marized: “If you are sick with acute viral hepatitis and taking acetaminophen, you are more likely to go into acute liver failure… even if you take therapeutic doses.”

Given acetaminophen’s known effects on the liver, Lee commented, “I am surprised that it’s still on the market.” He elaborated to a Reporter: “I don’t think that any drug with this amount of use and length of time on the market will ever be taken off the market, but there should be labeling change.” Lee noted that the FDA doesn’t re- quire that over-the-counter medicines contain acetaminophen so state on the front of the package — although it had been four years since an FDA advisory committee recommended that the agency impose such a requirement.

In November 2006 a paper in Hepatology described a study led by Anne Larsen of the University of Washington Medical Center.

The marketing of Tylenol is one of the all-time triumphs in the annals of corporate public relations. By the start of the ’80s, Tylenol had surpassed aspirin and had a 37% share of the OTC painkiller market. It generated almost 20% of J&J’s profits dur- ing the first three quarters of 1982. But then came a national recall of all Tylenol prod- ucts, occasioned by a whacko terrorist in Chicago who laced some bottles with cya- nide and killed seven people. CEO James Burke’s handing of the situation is held up in the business schools as a model of genius p.r. It is the subject of many learned articles, theses, even books.

“Johnson & Johnson’s handling of the Tylenol crisis is clearly the example other companies should follow if the find themselves on the brink of losing everything,” says a typically admiring text used in a De- fence Department communications course. Actually, the terrorist’s attack in Chicago gave Johnson & Johnson an opportunity to confute safety with purity. Johnson & Johnson reintroduced Tylenol with great fanfare “in new triple-safety seal packag- ing,” writes the DoD analyst, “a glued box, a plastic seal over the neck of the bottle, and a foil seal over the mouth of the bottle.” The label carried a warning not to use if the package had been tampered with — and nothing about liver damage. The unspeakable message, etched heavily into consumer consciousness, was that the synthetic com- pound inside the bottle is perfectly safe as long as it’s pure.

James Burke, master salesman of Tylenol, has been selling the marijuana prohi- bition for decades. Bill Clinton gave Burke the Presidential medal of honor in 1996, when he was chairman emeritus Partner- ship for a Drug-Free America, the private- sector partners of the drug czar’s office.

The Robert Wood Johnson Foundation helped launch and has been the major backer of another prohibitionist propa- ganda project, the Community Anti-Drug Coalitions of America.

Aspirin Lowers Cancer Risk Effect strongest against colorectal, other gastrointestinal tumors

Dr. Andrew T. Chan, an associate professor of medicine at Harvard Medical School, led a team analyzing aspirin use by Andrew Chan, MD 135,965 people tracked by the Nurses’ Health Study and the Health Professionals Follow-up Study. Chan et al reported in JAMA Oncology March 3 that those who used a standard or a low-dose aspirin at least twice a week for five years had a 24 percent reduced risk of any type of cancer. Their rate of colorectal cancer was lowered by 19 percent! Their rate of gastrointestinal cancer was lowered by 15 percent! No effect was seen in the risk of breast, prostate, or lung cancer.

“Based on our estimates,” Dr. Chan said, “we think that regular aspirin use could prevent almost 30,000 cases of gastrointestinal cancers a year, which account for about 25 percent of all cancer deaths.”

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